

COVER PAGE

2018 NOV 19 PM 3:14

Please type or print in ink.

NAME OF FILER (LAST)

McNew

(FIRST)

Connie

(MIDDLE)

May

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Natural Resources, Department of Conservation

Division, Board, Department, District, if applicable

Division of Oil, Gas and Geothermal Resources - Inland Dist.

Your Position

Staff Services Analyst

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency:

Position:

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other

3. Type of Statement (Check at least one box)

☐ Annual: The period covered is January 1, 2017, through December 31, 2017.

-or-

The period covered is ____/____/____, through December 31, 2017.

☐ Leaving Office: Date Left ____/____/____
(Check one)

☐ The period covered is January 1, 2017, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☒ Assuming Office: Date assumed 11 / 14 / 2018

☐ Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____

Schedules attached

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET
(Business or Agency Address Recommended - Public Document)

4800 Stockdale Hwy, Ste. 100

CITY

Bakersfield

STATE

CA

ZIP CODE

93309

DAYTIME TELEPHONE NUMBER

(661) 334-3645

E-MAIL ADDRESS

Connie.McNew@conservation.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

11/15/18

(month, day, year)

Signature

(File the originally signed statement with your filing official.)